

## UNITED STATES DISTRICT COURT

NORTHERN

District of

OHIO

Corey Cheney

**AMENDED**

Plaintiff

V.

University Hospitals

Defendant

I, Corey J Cheney, declare that I am the (check appropriate box)  
 petitioner/plaintiff/movant       other

in the above-entitled proceeding; that in support of my request to proceed without prepayment of fees or costs under 28 USC §1915 I declare that I am unable to pay the costs of these proceedings and that I am entitled to the relief sought in the complaint/petition/motion.

In support of this application, I answer the following questions under penalty of perjury:

1. Are you currently incarcerated?       Yes       No      (If "No," go to Part 2)

If "Yes," state the place of your incarceration \_\_\_\_\_

Are you employed at the institution? \_\_\_\_\_ Do you receive any payment from the institution? \_\_\_\_\_

Attach a ledger sheet from the institution(s) of your incarceration showing at least the past six months' transactions.

2. Are you currently employed?       Yes       No

a. If the answer is "Yes," state the amount of your take-home salary or wages and pay period and give the name and address of your employer. *Adecco STAFFING 425.00 per week  
26949 Chagrin Blvd Suite 100*

b. If the answer is "No," state the date of your last employment, the amount of your take-home salary or wages and pay period and the name and address of your last employer.

3. In the past 12 twelve months have you received any money from any of the following sources?

- |   |   |  |
|---|---|--|
| a. Business, profession or other self-employment  | <input type="checkbox"/> Yes            | <input type="checkbox"/> No            |
| b. Rent payments, interest or dividends           | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No            |
| c. Pensions, annuities or life insurance payments | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| d. Disability or workers compensation payments    | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| e. Gifts or inheritances                          | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |
| f. Any other sources                              | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No |

If the answer to any of the above is "Yes," describe, on the following page, each source of money and state the amount received and what you expect you will continue to receive.

*Rent payment - \$1,250.00 Tenant lease now ended  
Overall Cleaning \$80.00 Cleaning contract suspended.*

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4. Do you have any cash or checkings or savings accounts?  Yes  No

If "Yes," state the total amount. \$ 200.00

5. Do you own any real estate, stocks, bonds, securities, other financial instruments, automobiles or any other thing of value?  Yes  No

If "Yes," describe the property and state its value.

2220 E 97 Single Family Value \$ 30,000 in Foreclosure  
 2256 E 84. Single Family Value \$ 10,000 in Foreclosure  
 2201 E 90. \$ 20,000 in Foreclosure

6. List the persons who are dependent on you for support, state your relationship to each person and indicate how much you contribute to their support. 4

Yolonda Cheney - wife  
 Jaisen Cheney - 4yr old son  
 Jaisen Cheney - 2 month old Baby

I declare under penalty of perjury that the above information is true and correct.

3/3/09

Date

Signature of Applicant

**NOTICE TO PRISONER:** A Prisoner seeking to proceed without prepayment of fees shall submit an affidavit stating all assets. In addition, a prisoner must attach a statement certified by the appropriate institutional officer showing all receipts, expenditures, and balances during the last six months in your institutional accounts. If you have multiple accounts, perhaps because you have been in multiple institutions, attach one certified statement of each account.